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7590

11/28/2003

Christopher H. Hunter
 PARKER-HANNIFIN CORPORATION
 6035 Parkland Boulevard
 Cleveland, OH 44124-4141

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Christopher H. Hunter (Depositor's name)
 (Signature)
 February 17, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/915,159	07/25/2001	Steven R. Knight	2802-135-067	6232

TITLE OF INVENTION: FILTER ELEMENT CHANGE INDICATOR HANDLE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/01/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAVAGE, MATTHEW O	1723	210-470000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Christopher H. Hunter

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Parker-Hannifin Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

6035 Parkland Boulevard
 Cleveland, Ohio 44124-4141

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 16-0325 (enclose an extra copy of this form).

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(Date)

02/17/2004

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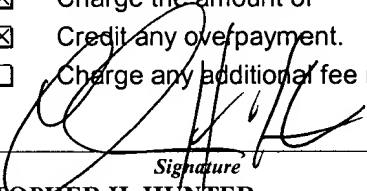
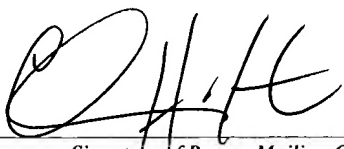
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TRANSMIT THIS FORM WITH FEE(S)

TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) (37 C.F.R. 1.311)				Docket No. 2802-135-067	
Applicant(s): STEVEN R. KNIGHT					
Serial No. 09/915,159	Filing Date 7/25/2001	Examiner Matthew O. Savage	Group Art Unit 1723	Confirmation No. 6232	
Invention: FILTER ELEMENT CHANGE INDICATOR HANDLE					
<p style="text-align: center;"><u>Mail Stop Issue Fee</u> <u>TO THE COMMISSIONER FOR PATENTS</u> <u>P.O. Box 1450</u> <u>Alexandria, VA 22313-1450</u></p> <p>Transmitted herewith are the following for the above-identified application.</p> <p><input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85</p> <p><input checked="" type="checkbox"/> Utility Fee: \$ 1330.00 <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____</p> <p><input checked="" type="checkbox"/> Publication Fee: \$ 300.00</p> <p><input type="checkbox"/> A check in the amount of _____ is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 16-0325 as described below.</p> <p><input checked="" type="checkbox"/> Charge the amount of \$1,630.00</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input type="checkbox"/> Charge any additional fee required.</p> <p style="text-align: right;">Dated: February 17, 2004</p> <div style="display: flex; justify-content: space-between;"><div><p> Signature</p><p>CHRISTOPHER H. HUNTER Reg. No. 34,187 Parker-Hannifin Corporation 6035 Parkland Boulevard Cleveland, Ohio 44124-4141 Phone: 216-896-2461 Fax: 216-896-4027 e-mail: chunter@parker.com</p></div><div><p>CC:</p><p style="text-align: center;">Certificate of Transmission by Facsimile This certificate may only be used if paying by deposit account.</p><div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States Patent and Trademark Office (Fax _____) on _____</p><p>Date _____</p><p>_____ Signature</p><p>_____ Typed or Printed Name of Person Signing Certificate</p></div></div><div><p style="text-align: center;">Certificate of Mailing by First Class Mail</p><div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited 02/17/2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;"> Signature of Person Mailing Correspondence</p><p style="text-align: center;">CHRISTOPHER H. HUNTER Typed or Printed Name of Person Mailing Correspondence</p></div></div></div>					